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## BIB DATA SHEET

CONFIRMATION NO. 7849

<b>SERIAL NUMBER</b> 10/712,797	<b>FILING or 371(c) DATE</b> 11/13/2003 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2609	<b>ATTORNEY DOCKET NO.</b> 3226.1020-001	
<b>APPLICANTS</b> Amit Sinha, Marlborough, MA; <i>Yes</i> <b>** CONTINUING DATA *****</b> <i>SB 07-16-2007</i> This appln claims benefit of 60/425,967 11/13/2002 <i>SB</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <i>JB 07-16-2007</i> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/10/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i>	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> HAMILTON, BROOK, SMITH & REYNOLDS, P.C. 530 VIRGINIA ROAD P.O. BOX 9133 CONCORD, MA 01742-9133 UNITED STATES					
<b>TITLE</b> Optimum frame fragmentation method for communication over error prone channels					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		